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STATES NATIONAL STAGE WORKS

ET (DO/EO)

Charitta Burt, Paralegal

U. S. Application No. 10/525724

Publication Date 4-1-04

Publication No. WO 2004/026355 PCT/RO/101 ☒

Copy of ISR JP, Copy of IPER JP

Assignee information: \_\_\_\_\_

Priority Info: Country JP No. 2002-253322 date 8.30.02 MORE

Correspondence checked: \_\_\_\_\_ deposit account 19-0089

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT JP2003 1011048 Language JP

Copy in International Application: ☒; Translation: yes ☒ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_

371 Filing Fees: 900; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 7 Chargeable 7 Independent 2 multiple 40

Number of drawing Sheets: 3 Foreign language: \_\_\_\_\_

Oath/Declaration: ☐ signed ☒ unsigned ☐ defective ☐ completed \_\_\_\_\_ Power of Attorney: \_\_\_\_\_

Small entity fee: \_\_\_\_\_ SME document yes \_\_\_\_\_ no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Copy ISA References \_\_\_\_\_

Copy of IPER: ☒; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_

Preliminary Amendment(s): ☒ date: 28 Feb 05; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: \_\_\_\_\_ DATE: \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_

Request for Immediate Examination: ☒

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: \_\_\_\_\_ forwarded to Assignment branch date: \_\_\_\_\_

Priority Document(s): ☒ Number of copies included 1

Date of 35 USC Receipt of Request: 28 Feb 05

Notes:

Date Completion USC 371 Requirements: \_\_\_\_\_

Notice of Missing Requirements: 10-5-05

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_

Other forms: 301, 304, 308, 332, 408 Extension of time: Number of months \_\_\_\_\_